

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000097679

Entity Name: AMERIWAY SERVICES, INC.

FILED
Jul 07, 2008
Secretary of State

Current Principal Place of Business:

10770 SW 67 DRIVE
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

10770 SW 67 DRIVE
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 26-0829245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICK SPRADLIN, PLLC
4001 WEST HENRY AVENUE
SUITE 306
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: GANDUR, SCHARVELL J
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: DIR () Delete
Name: MARTIN, FRANK
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: PRES () Delete
Name: GANDUR, SCHARVELL J
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: VP (X) Delete
Name: FRANK, MARTIN
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: SEC () Delete
Name: CROCKETT, WILLIAM J
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: TREA () Delete
Name: OSLE, OSCAR
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES (X) Change () Addition
Name: WILLIAM, CROCKETT J
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: VP (X) Change () Addition
Name: OSCAR, OSLE
Address: 10770 SW 67 DRIVE
City-St-Zip: MIAMI, FL 33173 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCHARVELL J. GANDUR

DIR

07/07/2008

Electronic Signature of Signing Officer or Director

Date